

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

MADISON PROJECT INC.

ADDRESS (number and street)

PO BOX 66128

☐Check if different
than previously
reported. (ACC)

WASHINGTON

DC

20035

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00298000

3. IS THIS
REPORT☒NEW
(N)**OR**☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report (Q1)☒July 15
Quarterly Report (Q2)☐October 15
Quarterly Report (Q3)☐January 31
Quarterly Report (YE)☐July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

04

01

2010

through

06

30

2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Mr. Paul Kilgore

Signature of Treasurer

Electronically Filed by Mr. Paul Kilgore

Date

07

13

2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

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Write or Type Committee Name
MADISON PROJECT INC.

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2010	6701.07
(b) Cash on Hand at Beginning of Reporting Period	20645.38	
(c) Total Receipts (from Line 19)	211243.16	280600.24
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	231888.54	287301.31
7. Total Disbursements (from Line 31)	207091.81	262504.58
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	24796.73	24796.73
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	1543.62	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

MADISON PROJECT INC.

Report Covering the Period:

From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	41735.10	55495.10
(ii) Unitemized	168876.21	223310.47
(iii) TOTAL (add Lines 11(a)(i) and (ii)	210611.31	278805.57
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	210611.31	278805.57
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	144.37	1231.09
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	487.48	563.58
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	211243.16	280600.24
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	211243.16	280600.24

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	206325.51	260338.28	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	206325.51	260338.28	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	766.30	2166.30	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	207091.81	262504.58	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	207091.81	262504.58	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	210611.31	278805.57
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	210611.31	278805.57
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	206325.51	260338.28
37. Offsets to Operating Expenditures (from Line 15, page 3)	144.37	1231.09
38. Net Operating Expenditures (subtract Line 37 from Line 36)	206181.14	259107.19

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)

Mr James M. Adamson

Mailing Address 143 Maryland Dr

City

O Fallon

State

MO

Zip Code

63366-1162

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.26270

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Mr James M. Adamson

Mailing Address 143 Maryland Dr

City

O Fallon

State

MO

Zip Code

63366-1162

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 1 0

Transaction ID: SA11AI.27155

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

Mr Robert B Allan

Mailing Address 26760 St Francis Rd

City

Los Altos

State

CA

Zip Code

94022-1911

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.16161

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

390.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)

Mrs. Arlington Anderson

Mailing Address 283 Gertrude Ave

City

Fond Du Lac

State

WI

Zip Code

54935-2807

FEC ID number of contributing
federal political committee.

C

Name of Employer
NoneOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.24752

Amount of Each Receipt this Period

160.00

B.

Full Name (Last, First, Middle Initial)

Mr. Jean Angle

Mailing Address 70 S Stratford Rd

City

Eastborough

State

KS

Zip Code

67207-1019

FEC ID number of contributing
federal political committee.

C

Name of Employer
NoneOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 8 / 2 0 1 0

Transaction ID: SA11AI.25149

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

MS MARY Emma ARMSTRONG

Mailing Address 7605 MEADOW LN

City

CHEVY CHASE

State

MD

Zip Code

20815

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 0

Transaction ID: SA11AI.16414

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

760.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)
Mrs. Myra J Asplundh

Mailing Address PO Box 11

City State Zip Code
Bryn Athyn PA 19009-0011

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.24518

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)
Mr Bruce W. Babcock

Mailing Address 317 Palmor Dr

City State Zip Code
Ottawa IL 61350-4744

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 5 / 2 0 1 0

Transaction ID: SA11AI.26789

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)
Mr. James Bitner

Mailing Address PO Box 610

City State Zip Code
Rockport ME 04856-0610

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 4 / 2 0 1 0

Transaction ID: SA11AI.22907

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

570.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)
Mr James A Black, Jr

Mailing Address 201 W Evergreen Ave Apt 617

City State Zip Code
Philadelphia PA 19118-3831

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.24017

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
Mr James A Black, Jr

Mailing Address 201 W Evergreen Ave Apt 617

City State Zip Code
Philadelphia PA 19118-3831

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.24528

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
Mr James A Black, Jr

Mailing Address 201 W Evergreen Ave Apt 617

City State Zip Code
Philadelphia PA 19118-3831

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.24529

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)

Mr James A Black, Jr

Mailing Address 201 W Evergreen Ave Apt 617

City

Philadelphia

State

PA

Zip Code

19118-3831

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.24530

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Mrs. Norman P. Blake, Jr.

Mailing Address 11179 Estancia Way

City

Carmel

State

IN

Zip Code

46032-8259

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 0

Transaction ID: SA11AI.16921

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Mr John Brehmer

Mailing Address 201 Seabreeze Ct

City

Orchid

State

FL

Zip Code

32963-9508

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.24037

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)
 Carole Brown

Mailing Address 3 Selden Ave

City State Zip Code
 Branford CT 06405-5517

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 0 / 2 0 1 0

Transaction ID: SA11AI.22263

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)
 Frank P Brown

Mailing Address 5802 Spur 327

City State Zip Code
 Lubbock TX 79424-2704

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 1 / 2 0 1 0

Transaction ID: SA11AI.25626

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)
 Ms. Virginia W. Brown

Mailing Address 828 Van Buren St

City State Zip Code
 Herndon VA 20170-4651

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 0 / 2 0 1 0

Transaction ID: SA11AI.22192

Amount of Each Receipt this Period

80.00

SUBTOTAL of Receipts This Page (optional)

630.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)
 Ms Elizabeth M Bryden

Mailing Address 1 W 67th St Apt 611

City State Zip Code
 New York NY 10023-6200

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 5 / 2 0 / 2 0 1 0

Transaction ID: SA11AI.22228

Amount of Each Receipt this Period

112.00

B.

Full Name (Last, First, Middle Initial)
 Ms Elizabeth M Bryden

Mailing Address 1 W 67th St Apt 611

City State Zip Code
 New York NY 10023-6200

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

334.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 6 / 2 1 / 2 0 1 0

Transaction ID: SA11AI.25630

Amount of Each Receipt this Period

112.00

C.

Full Name (Last, First, Middle Initial)
 Claude Burns

Mailing Address PO Box 2815

City State Zip Code
 Rock Hill SC 29732-4815

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 4 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.16400

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1224.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)

Mrs Margaret A Cain

Mailing Address 2471 Presidential Dr

City

Tulare

State

CA

Zip Code

93274-8337

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Homemaker

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.24785

Amount of Each Receipt this Period

400.00

B.

Full Name (Last, First, Middle Initial)

James F Causley

Mailing Address 3333 Gulf Shore Blvd N, Apt 10

City

Harrison Township

State

MI

Zip Code

48045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.16108

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Mr. James F Causley, Jr

Mailing Address 37910 Seaway Ct

City

Harrison Township

State

MI

Zip Code

48045-6201

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 0

Transaction ID: SA11AI.22250

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)
 Ms. Eleanor Cobb

Mailing Address 131 S Vista St

City State Zip Code
Los Angeles CA 90036-2707

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
04 05 2010

Transaction ID: SA11AI.15893

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)
 Mrs Grace K. Cohane

Mailing Address 3335 Utopia Pkwy

City State Zip Code
Flushing NY 11358-1921

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
06 21 2010

Transaction ID: SA11AI.25677

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)
 Mr. Henry Corey

Mailing Address 80 Hereford Rd

City State Zip Code
Bronxville NY 10708-5417

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
06 15 2010

Transaction ID: SA11AI.24075

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

475.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)
MR ROBERT C COWEN

Mailing Address **2756 INDIAN SPRINGS RD**

City State Zip Code
MARIANNA FL 32446

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

06 / 28 / 2010

Transaction ID: SA11AI.27010

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)
Mr James H Crupper

Mailing Address **2400 Pine Ave**

City State Zip Code
Oklahoma City OK 73128-3037

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 25 / 2010

Transaction ID: SA11AI.22412

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
Mr James M Dale

Mailing Address **PO Box 8960**

City State Zip Code
Rancho Santa Fe CA 92067-8960

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

06 / 15 / 2010

Transaction ID: SA11AI.24088

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)

Ms Marjorie Davis

Mailing Address 6 Huckleberry Lane

City

Augusta

State

ME

Zip Code

04330

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 8 / 2 0 1 0

Transaction ID: SA11AI.22094

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Mr. William H. Davis

Mailing Address 21 Winding Way

City

Verona

State

PA

Zip Code

15147-3888

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 1 0

Transaction ID: SA11AI.27181

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

Mr Emil J Eisen

Mailing Address 9 Trison Ln

City

Clarksville

State

AR

Zip Code

72830-8003

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.21833

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1290.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)

Mr. John A Fakult

Mailing Address 232 E 293rd St

City

Willowick

State

OH

Zip Code

44095-4650

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 1 / 2 0 1 0

Transaction ID: SA11AI.21436

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

Mrs. Helen E Farson

Mailing Address 801 W Commonwealth Ave Apt 22

City

Alhambra

State

CA

Zip Code

91801-3621

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 4 / 2 0 1 0

Transaction ID: SA11AI.26618

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Mrs. Helen E Farson

Mailing Address 801 W Commonwealth Ave Apt 22

City

Alhambra

State

CA

Zip Code

91801-3621

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.27028

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

270.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 18 / 86

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)

Mr. Ernest Fortin

Mailing Address 4575 Highland Oaks Cir

City

Sarasota

State

FL

Zip Code

34235-5177

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 8 / 2 0 1 0

Transaction ID: SA11AI.22066

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

Mr. Ernest Fortin

Mailing Address 4575 Highland Oaks Cir

City

Sarasota

State

FL

Zip Code

34235-5177

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 8 / 2 0 1 0

Transaction ID: SA11AI.22067

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

Mr. Ernest Fortin

Mailing Address 4575 Highland Oaks Cir

City

Sarasota

State

FL

Zip Code

34235-5177

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 8 / 2 0 1 0

Transaction ID: SA11AI.25280

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

105.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)

Mr. Ernest Fortin

Mailing Address 4575 Highland Oaks Cir

City

Sarasota

State

FL

Zip Code

34235-5177

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 1 / 2 0 1 0

Transaction ID: SA11AI.25781

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

Mr. Ernest Fortin

Mailing Address 4575 Highland Oaks Cir

City

Sarasota

State

FL

Zip Code

34235-5177

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 1 / 2 0 1 0

Transaction ID: SA11AI.25782

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

Mr. Ernest Fortin

Mailing Address 4575 Highland Oaks Cir

City

Sarasota

State

FL

Zip Code

34235-5177

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 1 / 2 0 1 0

Transaction ID: SA11AI.25783

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

105.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)
 Mr. Ernest Fortin

Mailing Address 4575 Highland Oaks Cir

City State Zip Code
Sarasota FL 34235-5177

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 1 / 2 0 1 0

Transaction ID: SA11AI.25784

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)
 Mr. Stanley Fuchs

Mailing Address 270 Oxford Rd

City State Zip Code
New Rochelle NY 10804-3323

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 0

Transaction ID: SA11AI.22204

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)
 Mrs Paula Gividen

Mailing Address 11550 Newport Dr

City State Zip Code
Indianapolis IN 46236-2993

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.16229

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

435.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 21 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)

Mrs Paula Gividen

Mailing Address 11550 Newport Dr

City

Indianapolis

State

IN

Zip Code

46236-2993

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 1 / 2 0 1 0

Transaction ID: SA11AI.25809

Amount of Each Receipt this Period

120.00

B.

Full Name (Last, First, Middle Initial)

Mrs. Vonda Mae Green

Mailing Address 511 10th St

City

Orange

State

TX

Zip Code

77630-5630

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.22015

Amount of Each Receipt this Period

400.00

C.

Full Name (Last, First, Middle Initial)

William C Greer

Mailing Address 118 N Peters Rd # 294

City

Knoxville

State

TN

Zip Code

37923-4927

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.24162

Amount of Each Receipt this Period

80.00

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 22 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)
 Mr. William Greer

Mailing Address 320 E Fontanero St Ste 302

City State Zip Code
 Colorado Springs CO 80907-7526

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Dentist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.24595

Amount of Each Receipt this Period

320.00

B.

Full Name (Last, First, Middle Initial)
 William C Greer

Mailing Address 118 N Peters Rd # 294

City State Zip Code
 Knoxville TN 37923-4927

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 4 / 2 0 1 0

Transaction ID: SA11AI.26632

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)
 Ms Gayle Gull

Mailing Address 614 Myrtle St

City State Zip Code
 Redwood City CA 94061-1552

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 9 / 2 0 1 0

Transaction ID: SA11AI.27199

Amount of Each Receipt this Period

275.00

SUBTOTAL of Receipts This Page (optional)

635.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 23 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)
 Mr Donald G Gumpertz

Mailing Address PO Box 2450

City State Zip Code
Toluca Lake CA 91610-0450

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

06 / 18 / 2010

Transaction ID: SA11AI.25295

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)
 F William Hackmeyer

Mailing Address 5055 W Cnty Highway 30A Unit 1019

City State Zip Code
Santa Rosa Beach FL 32459-4371

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 18 / 2010

Transaction ID: SA11AI.25298

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
 Mr. Charles A. Hadley

Mailing Address PO Box 270557

City State Zip Code
Louisville CO 80027-5009

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

04 / 05 / 2010

Transaction ID: SA11AI.16094

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

825.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)

Mr. Charles A. Hadley

Mailing Address PO Box 270557

City

Louisville

State

CO

Zip Code

80027-5009

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 0

Transaction ID: SA11AI.16754

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Mr. Charles A. Hadley

Mailing Address PO Box 270557

City

Louisville

State

CO

Zip Code

80027-5009

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 1 / 2 0 1 0

Transaction ID: SA11AI.21553

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Mr. Charles A. Hadley

Mailing Address PO Box 270557

City

Louisville

State

CO

Zip Code

80027-5009

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 0

Transaction ID: SA11AI.22699

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 25 / 86

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)
ROBERT HAGNER

Mailing Address **15710 FLEETWOOD OAKS DR**

City State Zip Code
HOUSTON TX 77079

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

06 / 17 / 2010

Transaction ID: SA11AI.24870

Amount of Each Receipt this Period

400.00

B.

Full Name (Last, First, Middle Initial)
Mrs Stefanie F Haley

Mailing Address **PO Box 779**

City State Zip Code
Kermit TX 79745-0779

FEC ID number of contributing
federal political committee.

C

Name of Employer
Haley Brine Co

Occupation
Bookkeeper

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 10 / 2010

Transaction ID: SA11AI.23358

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)
Mr. George E Ham

Mailing Address **4304 S Mills St**

City State Zip Code
Independence MO 64055-5135

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

06 / 21 / 2010

Transaction ID: SA11AI.25841

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1900.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 26 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)

Mrs. Violet Hanna

Mailing Address 4123 Mary Ellen Ave

City

Studio City

State

CA

Zip Code

91604-2212

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 4 / 2 0 1 0

Transaction ID: SA11AI.26645

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Ms. Agnes R Hayden

Mailing Address 3420 NE Sugarhill Ave

City

Jensen Beach

State

FL

Zip Code

34957-3724

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 9 / 2 0 1 0

Transaction ID: SA11AI.22177

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Mrs. Ella Helm

Mailing Address 3385 Hallmark Dr SE

City

Marietta

State

GA

Zip Code

30067-5110

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.24181

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

1100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)

Mrs. Ella Helm

Mailing Address 3385 Hallmark Dr SE

City

Marietta

State

GA

Zip Code

30067-5110

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.24607

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

Mrs Florence Hooten

Mailing Address 7017 Saint Annes Ave

City

Lanham

State

MD

Zip Code

20706-3486

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 0 / 2 0 1 0

Transaction ID: SA11AI.21169

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Mrs Florence Hooten

Mailing Address 7017 Saint Annes Ave

City

Lanham

State

MD

Zip Code

20706-3486

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.23129

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

235.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)
Ms. Lois E Hoover

Mailing Address 511 Lee Creek Rd

City State Zip Code
Otter MT 59062-9401

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.21997

Amount of Each Receipt this Period

160.00

B.

Full Name (Last, First, Middle Initial)
Ms. Charlotte W Hopkins

Mailing Address 7450 Olivetas Ave Ofc

City State Zip Code
La Jolla CA 92037-4900

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.24894

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)
Mr. John A Hubbard

Mailing Address 129 Heron Pt

City State Zip Code
Chestertown MD 21620-1673

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.24895

Amount of Each Receipt this Period

212.00

SUBTOTAL of Receipts This Page (optional)

572.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)

Mrs Virginia Hug

Mailing Address 235 N 4th Ave

City

Elgin

State

OR

Zip Code

97827-9620

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.22000

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Ignacio Jay Hurtado

Mailing Address 2442 Rio Branca Dr

City

Hacienda Heights

State

CA

Zip Code

91745-4825

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.24904

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

Ms. Barbara Johnson

Mailing Address 2000 Arkwright St

City

Saint Paul

State

MN

Zip Code

55117-2037

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.16546

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)

Ms. Barbara Johnson

Mailing Address 2000 Arkwright St

City

Saint Paul

State

MN

Zip Code

55117-2037

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.21687

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

Mr. Ronald Johnson

Mailing Address 10620 Reva St

City

Bellflower

State

CA

Zip Code

90706-7140

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.26433

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

Mr Gilbert Jones

Mailing Address 1158 Sudden Vly

City

Bellingham

State

WA

Zip Code

98229-4830

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 1 / 2 0 1 0

Transaction ID: SA11AI.25909

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

490.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)
Mr. Thomas Kavalier

Mailing Address 80 Pine St

City State Zip Code
New York NY 10005-1702

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 2 / 2 0 1 0

Transaction ID: SA11AI.15816

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)
MR THOMAS L KEMPNER

Mailing Address 895 PARK AVE

City State Zip Code
NEW YORK NY 10075

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lach Partners Corp

Occupation
Investment Banker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 8 / 2 0 1 0

Transaction ID: SA11AI.22103

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
Mr J D Kilgore

Mailing Address 3918 Brynmawr Dr

City State Zip Code
Richmond TX 77406-8132

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.24234

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

800.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)
MR WALTER KLAUS

Mailing Address **1008 1ST ST W APT 319**

City State Zip Code
HASTINGS MN 55033

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 18 / 2010

Transaction ID: SA11AI.25354

Amount of Each Receipt this Period

120.00

B.

Full Name (Last, First, Middle Initial)
Ms Maxine Knerr

Mailing Address **11904 Kingston St**

City State Zip Code
Grand Terrace CA 92313-5151

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.00

Date of Receipt

06 / 15 / 2010

Transaction ID: SA11AI.24245

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)
Mr Robert Kramer

Mailing Address **1233 N Gulfstream Ave Unit 1403**

City State Zip Code
Sarasota FL 34236-8958

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

06 / 14 / 2010

Transaction ID: SA11AI.23732

Amount of Each Receipt this Period

80.00

SUBTOTAL of Receipts This Page (optional)

275.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)

Mr Robert Kramer

Mailing Address 1233 N Gulfstream Ave Unit 1403

City

Sarasota

State

FL

Zip Code

34236-8958

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

06 / 18 / 2010

Transaction ID: SA11AI.25356

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Mr. Morton S. Landy

Mailing Address 100 Jacob Fryer Ln

City

Mahaffey

State

PA

Zip Code

15757-6508

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 15 / 2010

Transaction ID: SA11AI.24251

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

Mr J Smith Lanier, II

Mailing Address PO Box 70

City

West Point

State

GA

Zip Code

31833-0070

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / 08 / 2010

Transaction ID: SA11AI.16193

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

800.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)
 Mr Richard A Lewis

Mailing Address 3674 Via Calabria

City State Zip Code
Escondido CA 92025-7674

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 0 3 / 2 0 1 0

Transaction ID: SA11AI.22901

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)
 Mr Alan Loeffler

Mailing Address 113 NE 3rd St

City State Zip Code
Oklahoma City OK 73104-2234

FEC ID number of contributing
federal political committee.

C

Name of Employer
Federal Corporation

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 5 / 2 0 1 0

Transaction ID: SA11AI.26871

Amount of Each Receipt this Period

400.00

C.

Full Name (Last, First, Middle Initial)
 Mr Leonard A Loesch

Mailing Address 5002 Harrods Landing Dr

City State Zip Code
Prospect KY 40059-9300

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 9 / 2 0 1 0

Transaction ID: SA11AI.27235

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)

Mr Robert Long

Mailing Address 47 Savannah Trl

City

Hilton Head Island

State

SC

Zip Code

29926-2693

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 1 0

Transaction ID: SA11AI.17013

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Mr Robert Long

Mailing Address 47 Savannah Trl

City

Hilton Head Island

State

SC

Zip Code

29926-2693

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 4 / 2 0 1 0

Transaction ID: SA11AI.21879

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Mr Robert Long

Mailing Address 47 Savannah Trl

City

Hilton Head Island

State

SC

Zip Code

29926-2693

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 8 / 2 0 1 0

Transaction ID: SA11AI.25366

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)

Ms Marguerite Lorentson

Mailing Address 7200 W Dahlke St

City

Ludington

State

MI

Zip Code

49431-9421

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.21771

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Mrs. Ingrid Ludscheidt

Mailing Address 1230 Taylor Lane Ext

City

Lehigh Acres

State

FL

Zip Code

33936-6159

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 8 / 2 0 1 0

Transaction ID: SA11AI.25369

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

Jack Mahan

Mailing Address 863 Potosi St Apt 4

City

Farmington

State

MO

Zip Code

63640-3309

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 7 / 2 0 1 0

Transaction ID: SA11AI.22556

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)

John M Mattingly

Mailing Address 15408 Spring Meadows Dr

City

Darnestown

State

MD

Zip Code

20874-3434

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 1 / 2 0 1 0

Transaction ID: SA11AI.21584

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

Mr Allan C. Mayer

Mailing Address 7461 E McLellan Ln

City

Scottsdale

State

AZ

Zip Code

85250-4641

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.24306

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

MR MICHAEL MILLER

Mailing Address 4402 BOXWOOD RD

City

BETHESDA

State

MD

Zip Code

20816

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

INVESTMENTS

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.21627

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

900.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)

Mrs Anntoinette C. Mire

Mailing Address 301 Wayne Dr

City

Shreveport

State

LA

Zip Code

71105-4719

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 5 / 2 0 1 0

Transaction ID: SA11AI.26885

Amount of Each Receipt this Period

80.00

B.

Full Name (Last, First, Middle Initial)

Mrs. Eva W. Moore

Mailing Address 2808 Ruleme St

City

Eustis

State

FL

Zip Code

32726-6527

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 0 / 2 0 1 0

Transaction ID: SA11AI.23416

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Mrs. Eva W. Moore

Mailing Address 2808 Ruleme St

City

Eustis

State

FL

Zip Code

32726-6527

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

445.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.24333

Amount of Each Receipt this Period

225.00

SUBTOTAL of Receipts This Page (optional)

355.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 86

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)

Mrs. Eva W. Moore

Mailing Address 2808 Ruleme St

City

Eustis

State

FL

Zip Code

32726-6527

FEC ID number of contributing
federal political committee.

C

Name of Employer
NoneOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	8		2	0	1	0

Transaction ID: SA11AI.25396

Amount of Each Receipt this Period

600.00

B.

Full Name (Last, First, Middle Initial)

Mr Joseph H Moore, III

Mailing Address PO Box 5132

City

Sun City West

State

AZ

Zip Code

85376-5132

FEC ID number of contributing
federal political committee.

C

Name of Employer
NoneOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	3		2	0	1	0

Transaction ID: SA11AI.21730

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

Mr. Jack K Nisselius

Mailing Address PO Box 3006

City

Gillette

State

WY

Zip Code

82717-3006

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	1		2	0	1	0

Transaction ID: SA11AI.26050

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1300.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 86

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.**A.**Full Name (Last, First, Middle Initial)
MR RALPH PADULA

Mailing Address 1648 CORAL POINT DR

City	State	Zip Code
CAPE CORAL	FL	33990

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYEDOccupation
REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	0

Transaction ID: SA11AI.22748

Amount of Each Receipt this Period

250.00

B.Full Name (Last, First, Middle Initial)
Mr. Bryan M. Park

Mailing Address 13906 SW 216th St

City	State	Zip Code
Vashon	WA	98070-6335

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	1	0

Transaction ID: SA11AI.24997

Amount of Each Receipt this Period

500.00

C.Full Name (Last, First, Middle Initial)
PHILIP PAYNE

Mailing Address 3589 SHUGART CT

City	State	Zip Code
WARRENTON	VA	20187

FEC ID number of contributing
federal political committee.

C

Name of Employer
NoneOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	4		2	0	1	0

Transaction ID: SA11AI.23850

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 86

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)

MR JOHN G PENSON

Mailing Address 3756 ARMSTRONG AVE

City

DALLAS

State

TX

Zip Code

75205

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

INVESTMENTS

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	1	0

Transaction ID: SA11AI.16225

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Mr. William Peyton

Mailing Address 9228 E State Road 42

City

Rago

State

KS

Zip Code

67142-9533

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	2		2	0	1	0

Transaction ID: SA11AI.22853

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Mr Edward L Probst, Jr

Mailing Address 1920 Franklin St

City

Columbus

State

IN

Zip Code

47201-5152

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	0

Transaction ID: SA11AI.26716

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

800.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)

Mrs. Teresa A. Regard

Mailing Address 720 E Cherry Ln

City

Arlington Heights

State

IL

Zip Code

60004-3217

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 8 / 2 0 1 0

Transaction ID: SA11AI.22042

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Mr Edwin Sandham Revoc

Mailing Address 1964 SW Saint Andrews Dr

City

Palm City

State

FL

Zip Code

34990-2210

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 1 0

Transaction ID: SA11AI.22492

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Mr. Everett G. Roehl

Mailing Address 11574 N Galvin Ave

City

Marshfield

State

WI

Zip Code

54449-8518

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.25034

Amount of Each Receipt this Period

400.00

SUBTOTAL of Receipts This Page (optional)

900.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 86

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.**A.**Full Name (Last, First, Middle Initial)
Ernest C Roessler

Mailing Address 14932 Celle Way

City	State	Zip Code
Naples	FL	34110-2755

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	3	/	2	0	1	0

Transaction ID: SA11AI.26504

Amount of Each Receipt this Period

250.00

B.Full Name (Last, First, Middle Initial)
Mr. Warren L Romans

Mailing Address 5703 Williamsburg Landing Dr Apt 1

City	State	Zip Code
Williamsburg	VA	23185-8006

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	4	/	2	0	1	0

Transaction ID: SA11AI.26730

Amount of Each Receipt this Period

1000.00

C.Full Name (Last, First, Middle Initial)
Mr. Burton W. Rounds

Mailing Address 122 96th Ave W

City	State	Zip Code
Duluth	MN	55808-2105

FEC ID number of contributing
federal political committee.

C

Name of Employer
NoneOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	9	/	2	0	1	0

Transaction ID: SA11AI.23197

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

1325.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 86

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.**A.**Full Name (Last, First, Middle Initial)
Mrs Mary R Ruhlin

Mailing Address 4000 Aston Gardens Dr Unit 211

City	State	Zip Code
Venice	FL	34292-6004

FEC ID number of contributing
federal political committee.

C

Name of Employer
NoneOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	0	/	2	0	1	0

Transaction ID: SA11AI.21162

Amount of Each Receipt this Period

500.00

B.Full Name (Last, First, Middle Initial)
Ms Nancy Sampson

Mailing Address 9614 Parkwood Ct

City	State	Zip Code
Fort Myers	FL	33908-2861

FEC ID number of contributing
federal political committee.

C

Name of Employer
NoneOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	8	/	2	0	1	0

Transaction ID: SA11AI.22059

Amount of Each Receipt this Period

2000.00

C.Full Name (Last, First, Middle Initial)
Mr. Edwin Sandham

Mailing Address 1964 SW Saint Andrews Dr

City	State	Zip Code
Palm City	FL	34990-2210

FEC ID number of contributing
federal political committee.

C

Name of Employer
NoneOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	9	/	2	0	1	0

Transaction ID: SA11AI.23202

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)
 Mr. Edwin Sandham

Mailing Address 1964 SW Saint Andrews Dr

City State Zip Code
 Palm City FL 34990-2210

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

930.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 1 4 / 2 0 1 0

Transaction ID: SA11AI.23885

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)
 Mr. Edwin Sandham

Mailing Address 1964 SW Saint Andrews Dr

City State Zip Code
 Palm City FL 34990-2210

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1005.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 1 4 / 2 0 1 0

Transaction ID: SA11AI.23886

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)
 Mr. Edwin Sandham

Mailing Address 1964 SW Saint Andrews Dr

City State Zip Code
 Palm City FL 34990-2210

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1205.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 1 8 / 2 0 1 0

Transaction ID: SA11AI.25467

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

525.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)

Mr. Charles G. Schappert

Mailing Address PO Box 479

City

Paulsboro

State

NJ

Zip Code

08066-0479

FEC ID number of contributing
federal political committee.

C

Name of Employer
H.P.S., Inc.Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 1 / 2 0 1 0

Transaction ID: SA11AI.26144

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Richard Schulze

Mailing Address 26331 Woodlyn Dr

City

Bonita Spgs

State

FL

Zip Code

34134-5633

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.27129

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Ms. Ann Schutt

Mailing Address 3021 Chapel View Dr

City

Beltsville

State

MD

Zip Code

20705-3429

FEC ID number of contributing
federal political committee.

C

Name of Employer
Montgomery County Public
SchoolsOccupation
Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.27131

Amount of Each Receipt this Period

400.00

SUBTOTAL of Receipts This Page (optional)

1150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)

MRS MYRTLE M SERVAT

Mailing Address 601 WILTZ ST

City

RAYNE

State

LA

Zip Code

70578

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 4 / 2 0 1 0

Transaction ID: SA11AI.23895

Amount of Each Receipt this Period

80.00

B.

Full Name (Last, First, Middle Initial)

Mr Lawrence Shanley

Mailing Address PO Box 86

City

Peru

State

NY

Zip Code

12972-0086

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 1 / 2 0 1 0

Transaction ID: SA11AI.26152

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Mitchell Simons

Mailing Address 81 Sweetbriar Ave

City

Fort Thomas

State

KY

Zip Code

41075-1620

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 1 / 2 0 1 0

Transaction ID: SA11AI.21586

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

380.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)
 Mrs. Ilona R. Soldes

Mailing Address 10 Gristmill Ln

City State Zip Code
Great Neck NY 11023-1813

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 4 / 2 0 1 0

Transaction ID: SA11AI.23924

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)
 Mrs. Ilona R. Soldes

Mailing Address 10 Gristmill Ln

City State Zip Code
Great Neck NY 11023-1813

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

620.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.25074

Amount of Each Receipt this Period

400.00

C.

Full Name (Last, First, Middle Initial)
 Mr Stuart Souders

Mailing Address 6751 Via Carona Dr

City State Zip Code
Huntington Beach CA 92647-6645

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.27144

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

635.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)
 Mr. Jimmy Stallings

Mailing Address PO Box 926

City State Zip Code
Stanton TX 79782-0926

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Accountant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 5 / 2 0 1 0

Transaction ID: SA11AI.26940

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)
 MRS KAREN STAMM

Mailing Address 6312 HILLCREST PL

City State Zip Code
ALEXANDRIA VA 22312

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.26343

Amount of Each Receipt this Period

80.00

C.

Full Name (Last, First, Middle Initial)
 MRS ADA A STRASENBURGH

Mailing Address PO BOX 608

City State Zip Code
OCEAN VIEW NJ 08230

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.26532

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

530.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 86

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)

Ms Louise Stuhmiller

Mailing Address PO Box 9005

City

Rancho Santa Fe

State

CA

Zip Code

92067-4005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	4		2	0	1	0

Transaction ID: SA11AI.21856

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

MR ROBERT SUNDERLAND

Mailing Address 953 PYRITE AVE

City

HENDERSON

State

NV

Zip Code

89011

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

758.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	1	0

Transaction ID: SA11AI.16547

Amount of Each Receipt this Period

258.00

C.

Full Name (Last, First, Middle Initial)

MR ROBERT SUNDERLAND

Mailing Address 953 PYRITE AVE

City

HENDERSON

State

NV

Zip Code

89011

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1158.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	1		2	0	1	0

Transaction ID: SA11AI.21576

Amount of Each Receipt this Period

400.00

SUBTOTAL of Receipts This Page (optional)

1158.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)

MR ROBERT SUNDERLAND

Mailing Address 953 PYRITE AVE

City

HENDERSON

State

NV

Zip Code

89011

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1208.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 0 / 2 0 1 0

Transaction ID: SA11AI.23454

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR ROBERT SUNDERLAND

Mailing Address 953 PYRITE AVE

City

HENDERSON

State

NV

Zip Code

89011

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1608.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.24469

Amount of Each Receipt this Period

400.00

C.

Full Name (Last, First, Middle Initial)

Mr. George B. Suter

Mailing Address 2580 Greenwood Acres Dr

City

Dekalb

State

IL

Zip Code

60115-4913

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 4 / 2 0 1 0

Transaction ID: SA11AI.26746

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1450.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)
 Mr Jack L Thompson

Mailing Address 3156 S Custer Rd

City State Zip Code
Monroe MI 48161-9703

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 8 / 2 0 1 0

Transaction ID: SA11AI.25509

Amount of Each Receipt this Period

400.00

B.

Full Name (Last, First, Middle Initial)
 Mr John Timlin

Mailing Address 309 N Piedmont St

City State Zip Code
Arlington VA 22203-3440

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.24728

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
 MRS MARTHA TURNEY

Mailing Address 1361 E BOOT RD

City State Zip Code
WEST CHESTER PA 19380

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

341.10

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.23231

Amount of Each Receipt this Period

51.10

SUBTOTAL of Receipts This Page (optional)

551.10

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)

Ms. Margaret M Turnquist

Mailing Address 353 Kittridge St

City

Midvale

State

UT

Zip Code

84047-1610

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 9 / 2 0 1 0

Transaction ID: SA11AI.27281

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

Mr. James D Van Sickle

Mailing Address 3600 SW Randolph Sq Unit 45

City

Topeka

State

KS

Zip Code

66611-3010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Vanguard Products Corp

Occupation

Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 0

Transaction ID: SA11AI.16711

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Mr Wayne L Waggoner

Mailing Address 1616 Cedar St

City

Lawrenceville

State

IL

Zip Code

62439-2154

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 4 / 2 0 1 0

Transaction ID: SA11AI.26758

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

290.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)

Mrs. Ruby S. Warren

Mailing Address 4020 Bluestem Cir

City

Norman

State

OK

Zip Code

73072-4525

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 0

Transaction ID: SA11AI.16925

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

Mrs. Ruby S. Warren

Mailing Address 4020 Bluestem Cir

City

Norman

State

OK

Zip Code

73072-4525

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.23243

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Mr. Jean F Webb, IV

Mailing Address 651 Clinton Ave

City

Haddonfield

State

NJ

Zip Code

08033-3805

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.24738

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)
 Mr. James A West, Sr.

Mailing Address 174 West Rd

City State Zip Code
Butler PA 16002-7902

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 1 / 2 0 1 0

Transaction ID: SA11AI.26229

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)
 Mr. Donald D Westfall

Mailing Address 1046 Centre St

City State Zip Code
Newton Center MA 02459-1642

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.27402

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
 Mr Frank Wetherbee

Mailing Address PO Box 3650

City State Zip Code
Albany GA 31706-3650

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 8 / 2 0 1 0

Transaction ID: SA11AI.25534

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)
 Mr Francis M Wilson

Mailing Address 150 Lewiston Rd

City State Zip Code
Grosse Pointe MI 48236-3524

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.26557

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)
 Mrs Mary O Winkels

Mailing Address 26 Camellia Ln

City State Zip Code
Columbus NC 28722-9474

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.16486

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)
 Mr Tim D Word

Mailing Address 401 Torcido Dr

City State Zip Code
San Antonio TX 78209-5647

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.26561

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)
 Dr. Darrell Wotta

Mailing Address 10942 N Pusch Ridge Vistas Dr

City State Zip Code
 Tucson AZ 85737-7312

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.22604

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
 Dr. Darrell Wotta

Mailing Address 10942 N Pusch Ridge Vistas Dr

City State Zip Code
 Tucson AZ 85737-7312

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 4 / 2 0 1 0

Transaction ID: SA11AI.26774

Amount of Each Receipt this Period

400.00

C.

Full Name (Last, First, Middle Initial)
 Mr William R. Wuestenfeld

Mailing Address 1901 Taylor Rd

City State Zip Code
 Columbus IN 47203-3908

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 1 / 2 0 1 0

Transaction ID: SA11AI.26258

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

1600.00

TOTAL This Period (last page this line number only)

41735.10

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 86

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)

Nova List Company

Mailing Address 13755 Sunrise Valley Dr. Ste 450

City

Herndon

State

VA

Zip Code

20171

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

563.58

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Transaction ID: SA17.15786

Amount of Each Receipt this Period

487.48

LRI - Usual & Normal

SUBTOTAL of Receipts This Page (optional)

487.48

TOTAL This Period (last page this line number only)

487.48

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A. Full Name (Last, First, Middle Initial) Action Mailers	Transaction ID: SB21B.15747 Date of Disbursement																				
Mailing Address 90 Commerce Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	1		2	0	1	0												
City Ashton State PA Zip Code 19012	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Printing & Mailing Candidate Name	<table border="1"> <tr> <td colspan="10">895.46</td> </tr> </table>	895.46																			
895.46																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Action Mailers	Transaction ID: SB21B.15766 Date of Disbursement																				
Mailing Address 90 Commerce Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	5		2	0	1	0												
City Ashton State PA Zip Code 19012	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Printing & Mailing Candidate Name	<table border="1"> <tr> <td colspan="10">2041.90</td> </tr> </table>	2041.90																			
2041.90																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Action Mailers	Transaction ID: SB21B.17123 Date of Disbursement																				
Mailing Address 90 Commerce Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	9		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	9		2	0	1	0												
City Ashton State PA Zip Code 19012	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Postage & Delivery Candidate Name	<table border="1"> <tr> <td colspan="10">13758.99</td> </tr> </table>	13758.99																			
13758.99																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

16696.35

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A. Full Name (Last, First, Middle Initial) Action Mailers	Transaction ID: SB21B.17132 Date of Disbursement																				
Mailing Address 90 Commerce Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		2	6		2	0	1	0												
City Ashton State PA Zip Code 19012	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Postage & Delivery	<table border="1"> <tr> <td colspan="10">1019.77</td> </tr> </table>	1019.77																			
1019.77																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Action Mailers	Transaction ID: SB21B.27413 Date of Disbursement																				
Mailing Address 90 Commerce Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	2		2	0	1	0												
City Ashton State PA Zip Code 19012	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Postage & Delivery	<table border="1"> <tr> <td colspan="10">3182.27</td> </tr> </table>	3182.27																			
3182.27																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Action Mailers	Transaction ID: SB21B.27435 Date of Disbursement																				
Mailing Address 90 Commerce Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	6		2	0	1	0												
City Ashton State PA Zip Code 19012	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Postage & Delivery	<table border="1"> <tr> <td colspan="10">1359.91</td> </tr> </table>	1359.91																			
1359.91																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

5561.95

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A. Full Name (Last, First, Middle Initial) Action Mailers	Transaction ID: SB21B.27456 Date of Disbursement
Mailing Address 90 Commerce Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 4 / 2 0 1 0</div> </div>
City Ashton State PA Zip Code 19012	Amount of Each Disbursement this Period
Purpose of Disbursement PAC Printing & Mailing	<div>1173.35</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) BIGEYE Direct	Transaction ID: SB21B.15773 Date of Disbursement
Mailing Address 13864 Redskin Dr.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 3 / 2 0 1 0</div> </div>
City Herndon State VA Zip Code 20171	Amount of Each Disbursement this Period
Purpose of Disbursement PAC Postage & Delivery	<div>7809.42</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) BIGEYE Direct	Transaction ID: SB21B.17118 Date of Disbursement
Mailing Address 13864 Redskin Dr.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 9 / 2 0 1 0</div> </div>
City Herndon State VA Zip Code 20171	Amount of Each Disbursement this Period
Purpose of Disbursement PAC Postage & Delivery	<div>622.35</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

9605.12

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 62 / 86

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A. Full Name (Last, First, Middle Initial) BIGEYE Direct	Transaction ID: SB21B.27411 Date of Disbursement																				
Mailing Address 13864 Redskin Dr.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	2		2	0	1	0												
City Herndon State VA Zip Code 20171	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Postage & Delivery Candidate Name	<table border="1"> <tr> <td colspan="10">256.15</td> </tr> </table>	256.15																			
256.15																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) BIGEYE Direct	Transaction ID: SB21B.27439 Date of Disbursement																				
Mailing Address 13864 Redskin Dr.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	7		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	7		2	0	1	0												
City Herndon State VA Zip Code 20171	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Printing & Mailing Candidate Name	<table border="1"> <tr> <td colspan="10">768.94</td> </tr> </table>	768.94																			
768.94																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) BIGEYE Direct	Transaction ID: SB21B.27458 Date of Disbursement																				
Mailing Address 13864 Redskin Dr.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	4		2	0	1	0												
City Herndon State VA Zip Code 20171	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Printing & Mailing Candidate Name	<table border="1"> <tr> <td colspan="10">241.03</td> </tr> </table>	241.03																			
241.03																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

1266.12

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 63 / 86

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)
COLORTREE OF VIRGINIA

Mailing Address 2519 BRITTONS HILL RD

City RICHMOND State VA Zip Code 23230

Purpose of Disbursement
PAC Printing & Mailing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.15750

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3195.99

B.

Full Name (Last, First, Middle Initial)
COLORTREE OF VIRGINIA

Mailing Address 2519 BRITTONS HILL RD

City RICHMOND State VA Zip Code 23230

Purpose of Disbursement
PAC Printing & Mailing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27441

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2526.57

C.

Full Name (Last, First, Middle Initial)
Direct Impressions

Mailing Address 2100 Tomlynn Street

City Richmond State VA Zip Code 23230

Purpose of Disbursement
PAC Printing & Mailing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.15752

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2634.00

SUBTOTAL of Disbursements This Page (optional)

8356.56

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A. Full Name (Last, First, Middle Initial) Direct Impressions	Transaction ID: SB21B.27417 Date of Disbursement																				
Mailing Address 2100 Tomlynn Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	3		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	3		2	0	1	0												
City Richmond State VA Zip Code 23230	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Printing & Mailing Candidate Name	<table border="1"> <tr> <td colspan="10">1491.00</td> </tr> </table>	1491.00																			
1491.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Direct Impressions	Transaction ID: SB21B.27443 Date of Disbursement																				
Mailing Address 2100 Tomlynn Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	7		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	7		2	0	1	0												
City Richmond State VA Zip Code 23230	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Printing & Mailing Candidate Name	<table border="1"> <tr> <td colspan="10">4314.00</td> </tr> </table>	4314.00																			
4314.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Direct Impressions	Transaction ID: SB21B.27460 Date of Disbursement																				
Mailing Address 2100 Tomlynn Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	4		2	0	1	0												
City Richmond State VA Zip Code 23230	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Printing & Mailing Candidate Name	<table border="1"> <tr> <td colspan="10">4480.00</td> </tr> </table>	4480.00																			
4480.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

10285.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

<p>A.</p> <p>Full Name (Last, First, Middle Initial) FULFILLMENT HOUSE</p> <p>Mailing Address 13860 REDSKIN DR</p> <p>City HERNDON State VA Zip Code 20171</p> <p>Purpose of Disbursement PAC Printing & Mailing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.15754</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1333.40"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) FULFILLMENT HOUSE</p> <p>Mailing Address 13860 REDSKIN DR</p> <p>City HERNDON State VA Zip Code 20171</p> <p>Purpose of Disbursement PAC Postage & Delivery</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.27424</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3586.00"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) FULFILLMENT HOUSE</p> <p>Mailing Address 13860 REDSKIN DR</p> <p>City HERNDON State VA Zip Code 20171</p> <p>Purpose of Disbursement PAC Printing & Mailing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.27462</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1730.80"/></p>

SUBTOTAL of Disbursements This Page (optional)

6650.20

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A. Full Name (Last, First, Middle Initial) GLOBAL PAYMENTS INC	Transaction ID: SB21B.15780 Date of Disbursement																				
Mailing Address 10705 RED RUN BLVD	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		3	0		2	0	1	0												
City OWINGS MILLS State MD Zip Code 21117	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Transaction Fees Candidate Name	<table border="1"> <tr> <td colspan="10">169.44</td> </tr> </table>	169.44																			
169.44																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) GLOBAL PAYMENTS INC	Transaction ID: SB21B.17135 Date of Disbursement																				
Mailing Address 10705 RED RUN BLVD	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		3	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		3	1		2	0	1	0												
City OWINGS MILLS State MD Zip Code 21117	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Transaction Fees Candidate Name	<table border="1"> <tr> <td colspan="10">200.81</td> </tr> </table>	200.81																			
200.81																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) GLOBAL PAYMENTS INC	Transaction ID: SB21B.27488 Date of Disbursement																				
Mailing Address 10705 RED RUN BLVD	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		3	0		2	0	1	0												
City OWINGS MILLS State MD Zip Code 21117	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Transaction Fees Candidate Name	<table border="1"> <tr> <td colspan="10">254.63</td> </tr> </table>	254.63																			
254.63																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

624.88

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)
HSP DIRECT

Mailing Address 13755 SUNRISE DR
SUITE 450

City HERNDON State VA Zip Code 20171

Purpose of Disbursement
PAC Creative Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.15756

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4835.14

B.

Full Name (Last, First, Middle Initial)
HSP DIRECT

Mailing Address 13755 SUNRISE DR
SUITE 450

City HERNDON State VA Zip Code 20171

Purpose of Disbursement
PAC Creative Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.15768

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3464.18

C.

Full Name (Last, First, Middle Initial)
HSP DIRECT

Mailing Address 13755 SUNRISE DR
SUITE 450

City HERNDON State VA Zip Code 20171

Purpose of Disbursement
PAC Creative Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.17109

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3962.07

SUBTOTAL of Disbursements This Page (optional)

12261.39

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 68 / 86

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

<p>A.</p> <p>Full Name (Last, First, Middle Initial) HSP DIRECT</p> <p>Mailing Address 13755 SUNRISE DR SUITE 450</p> <p>City HERNDON State VA Zip Code 20171</p> <p>Purpose of Disbursement PAC Creative Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.17125</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 0 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 2336.07</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) HSP DIRECT</p> <p>Mailing Address 13755 SUNRISE DR SUITE 450</p> <p>City HERNDON State VA Zip Code 20171</p> <p>Purpose of Disbursement PAC Creative Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.27445</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 7 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 321.39</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) HSP DIRECT</p> <p>Mailing Address 13755 SUNRISE DR SUITE 450</p> <p>City HERNDON State VA Zip Code 20171</p> <p>Purpose of Disbursement PAC Creative Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.27464</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 20338.40</p>

SUBTOTAL of Disbursements This Page (optional)

22995.86

TOTAL This Period (last page this line number only)

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

FEC Schedule B (Form 3X) (Revised 02/2003)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 70 / 86

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A. Full Name (Last, First, Middle Initial) Kenmore Envelope Company	Transaction ID: SB21B.27447 Date of Disbursement																				
Mailing Address 4641 International Trace Ct.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	7		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	7		2	0	1	0												
City Richmond State VA Zip Code 23231	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Printing & Mailing	<table border="1"> <tr> <td colspan="10">1759.38</td> </tr> </table>	1759.38																			
1759.38																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Kenmore Envelope Company	Transaction ID: SB21B.27467 Date of Disbursement																				
Mailing Address 4641 International Trace Ct.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	4		2	0	1	0												
City Richmond State VA Zip Code 23231	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Printing & Mailing	<table border="1"> <tr> <td colspan="10">805.52</td> </tr> </table>	805.52																			
805.52																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Nova List Company	Transaction ID: SB21B.15758 Date of Disbursement																				
Mailing Address 13755 Sunrise Valley Dr. Ste 450	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	1		2	0	1	0												
City Herndon State VA Zip Code 20171	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC List Rental & Maintenance	<table border="1"> <tr> <td colspan="10">1411.91</td> </tr> </table>	1411.91																			
1411.91																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

3976.81

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)
Nova List Company

Mailing Address 13755 Sunrise Valley Dr. Ste 450

City Herndon State VA Zip Code 20171

Purpose of Disbursement
PAC List Rental & Maintenance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.15762

Date of Disbursement

/ /

Amount of Each Disbursement this Period

785.00

B.

Full Name (Last, First, Middle Initial)
Nova List Company

Mailing Address 13755 Sunrise Valley Dr. Ste 450

City Herndon State VA Zip Code 20171

Purpose of Disbursement
PAC List Rental & Maintenance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.15770

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2619.51

C.

Full Name (Last, First, Middle Initial)
Nova List Company

Mailing Address 13755 Sunrise Valley Dr. Ste 450

City Herndon State VA Zip Code 20171

Purpose of Disbursement
PAC List Rental & Maintenance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.17111

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2731.44

SUBTOTAL of Disbursements This Page (optional)

6135.95

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A. Full Name (Last, First, Middle Initial) Nova List Company	Transaction ID: SB21B.27469 Date of Disbursement																				
Mailing Address 13755 Sunrise Valley Dr. Ste 450	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	4		2	0	1	0												
City Herndon State VA Zip Code 20171	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC List Rental & Maintenance Candidate Name	<table border="1"> <tr> <td colspan="10">15331.37</td> </tr> </table>	15331.37																			
15331.37																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Professional Data Services	Transaction ID: SB21B.17127 Date of Disbursement																				
Mailing Address 264 N. Lumpkin St. Ste. 202	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		2	0		2	0	1	0												
City Athens State GA Zip Code 30601	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Compliance Consulting Candidate Name	<table border="1"> <tr> <td colspan="10">1503.68</td> </tr> </table>	1503.68																			
1503.68																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Professional Data Services	Transaction ID: SB21B.19620 Date of Disbursement																				
Mailing Address 264 N. Lumpkin St. Ste. 202	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		2	1		2	0	1	0												
City Athens State GA Zip Code 30601	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Compliance Consulting Candidate Name	<table border="1"> <tr> <td colspan="10">450.00</td> </tr> </table>	450.00																			
450.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

17285.05

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A. Full Name (Last, First, Middle Initial) RST Marketing Associates	Transaction ID: SB21B.27451 Date of Disbursement																				
Mailing Address 1272 Corporate Park Dr.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	7		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	7		2	0	1	0												
City Forest State VA Zip Code 24551	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Printing & Mailing	<table border="1"> <tr> <td colspan="10">4385.14</td> </tr> </table>	4385.14																			
4385.14																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) SHORT TERM MAIL & POSTAGE ACCT	Transaction ID: SB21B.15764 Date of Disbursement																				
Mailing Address 13755 SUNRISE VALLEY DR SUITE 450	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	8		2	0	1	0												
City HERNDON State VA Zip Code 20171	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Postage & Mailing	<table border="1"> <tr> <td colspan="10">2699.03</td> </tr> </table>	2699.03																			
2699.03																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) SHORT TERM MAIL & POSTAGE ACCT	Transaction ID: SB21B.17113 Date of Disbursement																				
Mailing Address 13755 SUNRISE VALLEY DR SUITE 450	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	3		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	3		2	0	1	0												
City HERNDON State VA Zip Code 20171	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Postage & Delivery	<table border="1"> <tr> <td colspan="10">1751.87</td> </tr> </table>	1751.87																			
1751.87																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

8836.04

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A. Full Name (Last, First, Middle Initial)
SHORT TERM MAIL & POSTAGE ACCT

Mailing Address 13755 SUNRISE VALLEY DR
SUITE 450

City HERNDON State VA Zip Code 20171

Purpose of Disbursement
PAC Postage & Delivery

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27422

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4785.44

B. Full Name (Last, First, Middle Initial)
SHORT TERM MAIL & POSTAGE ACCT

Mailing Address 13755 SUNRISE VALLEY DR
SUITE 450

City HERNDON State VA Zip Code 20171

Purpose of Disbursement
PAC Postage & Delivery

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27471

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2654.15

C. Full Name (Last, First, Middle Initial)
Sisk Mailing Service

Mailing Address 203 Log Canoe Circle

City Stevensville State MD Zip Code 21666

Purpose of Disbursement
PAC Postage & Mailing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.15776

Date of Disbursement

/ /

Amount of Each Disbursement this Period

6250.00

SUBTOTAL of Disbursements This Page (optional)

13689.59

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A. Full Name (Last, First, Middle Initial) Sisk Mailing Service	Transaction ID: SB21B.17105 Date of Disbursement																				
Mailing Address 203 Log Canoe Circle	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	2		2	0	1	0												
City State Zip Code Stevensville MD 21666	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Postage & Delivery	<table border="1"> <tr> <td colspan="10">2581.97</td> </tr> </table>	2581.97																			
2581.97																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Sisk Mailing Service	Transaction ID: SB21B.17120 Date of Disbursement																				
Mailing Address 203 Log Canoe Circle	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	9		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	9		2	0	1	0												
City State Zip Code Stevensville MD 21666	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Postage & Delivery	<table border="1"> <tr> <td colspan="10">1167.09</td> </tr> </table>	1167.09																			
1167.09																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Sisk Mailing Service	Transaction ID: SB21B.17130 Date of Disbursement																				
Mailing Address 203 Log Canoe Circle	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		2	6		2	0	1	0												
City State Zip Code Stevensville MD 21666	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Postage & Delivery	<table border="1"> <tr> <td colspan="10">12800.00</td> </tr> </table>	12800.00																			
12800.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

16549.06

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 76 / 86

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A. Full Name (Last, First, Middle Initial) Sisk Mailing Service	Transaction ID: SB21B.27415 Date of Disbursement																				
Mailing Address 203 Log Canoe Circle	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	2		2	0	1	0												
City State Zip Code Stevensville MD 21666	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Postage & Delivery	<table border="1"> <tr> <td>373.95</td> </tr> </table>	373.95																			
373.95																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Sisk Mailing Service	Transaction ID: SB21B.27426 Date of Disbursement																				
Mailing Address 203 Log Canoe Circle	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	1		2	0	1	0												
City State Zip Code Stevensville MD 21666	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Postage & Delivery	<table border="1"> <tr> <td>3541.12</td> </tr> </table>	3541.12																			
3541.12																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Sisk Mailing Service	Transaction ID: SB21B.27428 Date of Disbursement																				
Mailing Address 203 Log Canoe Circle	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	4		2	0	1	0												
City State Zip Code Stevensville MD 21666	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Postage & Delivery	<table border="1"> <tr> <td>4887.19</td> </tr> </table>	4887.19																			
4887.19																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

8802.26

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)

Sisk Mailing Service

Mailing Address 203 Log Canoe Circle

City State Zip Code
Stevensville MD 21666

Purpose of Disbursement
PAC Postage & Delivery

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27437

Date of Disbursement

/ /

Amount of Each Disbursement this Period

138.51

B.

Full Name (Last, First, Middle Initial)

Sisk Mailing Service

Mailing Address 203 Log Canoe Circle

City State Zip Code
Stevensville MD 21666

Purpose of Disbursement
PAC Postage & Delivery

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27483

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1757.51

C.

Full Name (Last, First, Middle Initial)

Sisk Mailing Service

Mailing Address 203 Log Canoe Circle

City State Zip Code
Stevensville MD 21666

Purpose of Disbursement
PAC Postage & Delivery

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27485

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2213.53

SUBTOTAL of Disbursements This Page (optional)

4109.55

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)
SUNRISE DATA SERVICES

Transaction ID: SB21B.15760
Date of Disbursement

Mailing Address 13755 SUNRISE VALLEY DR
SUITE 450

/ /

City HERNDON State VA Zip Code 20171

Amount of Each Disbursement this Period

Purpose of Disbursement
PAC List Rental & Maintenance

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
SUNRISE DATA SERVICES

Transaction ID: SB21B.15772
Date of Disbursement

Mailing Address 13755 SUNRISE VALLEY DR
SUITE 450

/ /

City HERNDON State VA Zip Code 20171

Amount of Each Disbursement this Period

Purpose of Disbursement
PAC List Rental & Maintenance

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
SUNRISE DATA SERVICES

Transaction ID: SB21B.17115
Date of Disbursement

Mailing Address 13755 SUNRISE VALLEY DR
SUITE 450

/ /

City HERNDON State VA Zip Code 20171

Amount of Each Disbursement this Period

Purpose of Disbursement
PAC List Rental & Maintenance

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 79 / 86

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

<p>A. Full Name (Last, First, Middle Initial) SUNRISE DATA SERVICES</p> <p>Mailing Address 13755 SUNRISE VALLEY DR SUITE 450</p> <p>City HERNDON State VA Zip Code 20171</p> <p>Purpose of Disbursement PAC List Rental & Maintenance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.27473 Date of Disbursement <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 4 / 2 0 1 0</div> </p> <p>Amount of Each Disbursement this Period <div>4939.92</div> </p>
<p>B. Full Name (Last, First, Middle Initial) Tri-State Envelope</p> <p>Mailing Address PO Box 433</p> <p>City Beltsville State MD Zip Code 20704</p> <p>Purpose of Disbursement PAC Printing & Mailing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.27475 Date of Disbursement <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 4 / 2 0 1 0</div> </p> <p>Amount of Each Disbursement this Period <div>5192.18</div> </p>
<p>C. Full Name (Last, First, Middle Initial) UNITED BANK</p> <p>Mailing Address 2508 DALY DRIVE</p> <p>City CHANTILLY State VA Zip Code 22085</p> <p>Purpose of Disbursement PAC Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.15782 Date of Disbursement <div>M M / D D / Y Y Y Y</div> <div>0 4 / 3 0 / 2 0 1 0</div> </p> <p>Amount of Each Disbursement this Period <div>128.30</div> </p>

SUBTOTAL of Disbursements This Page (optional)

10260.40

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 80 / 86

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)
UNITED BANK

Mailing Address 2508 DALY DRIVE

City CHANTILLY State VA Zip Code 22085

Purpose of Disbursement

PAC Bank Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.17134

Date of Disbursement

05 / 31 / 2010

Amount of Each Disbursement this Period

87.17

B.

Full Name (Last, First, Middle Initial)
UNITED BANK

Mailing Address 2508 DALY DRIVE

City CHANTILLY State VA Zip Code 22085

Purpose of Disbursement

PAC Bank Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27489

Date of Disbursement

06 / 14 / 2010

Amount of Each Disbursement this Period

15.00

C.

Full Name (Last, First, Middle Initial)
UNITED BANK

Mailing Address 2508 DALY DRIVE

City CHANTILLY State VA Zip Code 22085

Purpose of Disbursement

PAC Bank Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27487

Date of Disbursement

06 / 30 / 2010

Amount of Each Disbursement this Period

136.98

SUBTOTAL of Disbursements This Page (optional)

239.15

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A. Full Name (Last, First, Middle Initial) UNITED BANK	Transaction ID: SB21B.27490 Date of Disbursement																				
Mailing Address 2508 DALY DRIVE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		3	0		2	0	1	0												
City CHANTILLY State VA Zip Code 22085	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Bank Fees	<table border="1"> <tr> <td colspan="10">7.50</td> </tr> </table>	7.50																			
7.50																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) United States Postal Office	Transaction ID: SB21B.15743 Date of Disbursement																				
Mailing Address 220 N Hatcher Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	1		2	0	1	0												
City Purcellville State VA Zip Code 20134	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC PO Box Rental	<table border="1"> <tr> <td colspan="10">520.00</td> </tr> </table>	520.00																			
520.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) United States Postal Office	Transaction ID: SB21B.27477 Date of Disbursement																				
Mailing Address 220 N Hatcher Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	8		2	0	1	0												
City Purcellville State VA Zip Code 20134	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Postage & Delivery	<table border="1"> <tr> <td colspan="10">185.00</td> </tr> </table>	185.00																			
185.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

712.50

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

<p>A.</p> <p>Full Name (Last, First, Middle Initial) United States Postal Office</p> <p>Mailing Address 220 N Hatcher Ave</p> <p>City Purcellville State VA Zip Code 20134</p> <p>Purpose of Disbursement PAC Postage & Delivery</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.27479</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="585.00"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) United States Postal Office</p> <p>Mailing Address 220 N Hatcher Ave</p> <p>City Purcellville State VA Zip Code 20134</p> <p>Purpose of Disbursement PAC Postage & Delivery</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.27481</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2000.00"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) VALLEY SELF STORAGE</p> <p>Mailing Address 37221 E RICHARDSON</p> <p>City PURCELLVILLE State VA Zip Code 20132</p> <p>Purpose of Disbursement PAC Storage Unit Rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.19616</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="60.00"/></p>

SUBTOTAL of Disbursements This Page (optional)

2645.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A. Full Name (Last, First, Middle Initial)
WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement
PAC Caging & Escrow

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.15745

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1126.64

B. Full Name (Last, First, Middle Initial)
WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement
PAC Caging & Escrow

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.15778

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2069.54

C. Full Name (Last, First, Middle Initial)
WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement
PAC Caging & Escrow

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.17107

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1578.46

SUBTOTAL of Disbursements This Page (optional)

4774.64

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)
WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City State Zip Code
CHANTILLY VA 20151

Purpose of Disbursement
PAC Caging & Escrow

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27454

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	0

Amount of Each Disbursement this Period

1789.30

SUBTOTAL of Disbursements This Page (optional)

1789.30

TOTAL This Period (last page this line number only)

206056.29

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial)
MADISON PROJECT - STATE PAC

Mailing Address PO Box 2352

City Purcellville State VA Zip Code 20134

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.19618

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	1		2	0	1	0

Amount of Each Disbursement this Period

766.30

SUBTOTAL of Disbursements This Page (optional)

766.30

TOTAL This Period (last page this line number only)

766.30

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
ELECTRONIC REPORTING SYSTEMS INCNature of Debt (Purpose):
BEST EFFORTS MAILINGS

Mailing Address 683 BERRYVILLE AVE

City State ZIP Code
WINCHESTER VA 22601

Outstanding Balance Beginning This Period

1543.62

Transaction ID: SD10.4110

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1543.62

1) **SUBTOTALS** This Period This Page (optional)..... ▶

1543.62

2) **TOTALS** This Period (last page this line number only)..... ▶

1543.62

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

1543.62